IAP6 Rec'd PCT/PTO 09 MAR 2006

Application Data Sheet

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Application Information	
Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD Disks::	
Number of Copies of CDs::	
Sequence Submission?::	
Computer Readable Form (CRF)?::	
Number of copies of CRF::	;
Title::	PSYCHOTROPIC AGENT, ANALGESIC
	AGENT AND/OR ANTIINFLAMMATORY
	AGENT, AND HEALTH FOOD
	CONTAINING BENZYLISOQUINOLINE
	OR BISBENZYLISOQUINOLINE
	DERIVATIVE
Attorney Docket Number::	NAKAJIMA 7
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	0
Small Entity?::	No
Latin Name::	
Variety Denomination Name::	
Petition Included::	No
Petition Type::	•
Licensed US Govt. Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No
Applicant Information	

Applicant Authority Type:: Inventor Primary Citizenship Country:: Japan Status:: **Full Capacity** Given Name:: Hiroshi Middle Name:: Family Name:: **NAKAJIMA** Name Suffix:: City of Residence:: Uji-shi State or Province of Residence:: **Kyoto** Country of Residence:: Japan Street of Mailing Address:: 80-4, Emba, Makishima-cho City of Mailing Address:: Uji-shi State or Province of Mailing Address:: **Kyoto** Country of Mailing Address:: Japan Postal or Zip Code of Mailing Address:: 611-0041 Applicant Authority Type:: Inventor **Primary Citizenship Country::** Japan Status:: Full Capacity Given Name:: Takao Middle Name:: Family Name:: **TANAHASHI** Name Suffix:: City of Residence:: Kobe-shi State or Province of Residence:: Hyogo Country of Residence:: Japan

Street of Mailing Address:: 2-1-1-1301, Ibukidaihigashimachi, Nishi-ku

City of Mailing Address:: Kobe-shi

State or Province of Mailing Address:: Hyogo

Country of Mailing Address:: Japan

Postal or Zip Code of Mailing Address:: 651-2242

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Japan

Status:: Full Capacity

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Given Name:: Jun
Middle Name::

Family Name:: YAMADA

Name Suffix::

City of Residence:: Takarazuka-shi

State or Province of Residence:: Hyogo Country of Residence:: Japan

Street of Mailing Address:: 1-11-19, Yamamotohigashi

City of Mailing Address:: Takarazuka-shi

State or Province of Mailing Address:: Hyogo Country of Mailing Address:: Japan

Postal or Zip Code of Mailing Address:: 665-0881

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Japan

Status:: Full Capacity

Given Name:: Shu-Jian

Middle Name::

Family Name:: SUN

Name Suffix::

City of Residence:: Nishinomiya-shi

State or Province of Residence:: Hyogo Country of Residence:: Japan

Street of Mailing Address:: 9-2, Matsuoi-cho

City of Mailing Address:: Nishinomiya-shi

State or Province of Mailing Address:: Hyogo Country of Mailing Address:: Japan

Postal or Zip Code of Mailing Address:: 662-0076

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Japan

Status:: Full Capacity

Given Name:: Yumi

Middle Name::

Family Name:: SUGIMOTO

Name Suffix::

City of Residence:: Ashiya-shi

State or Province of Residence:: Hyogo

Country of Residence:: Japan

Street of Mailing Address:: 4-4-301, Kusunoki-cho

City of Mailing Address:: Ashiya-shi

State or Province of Mailing Address:: Hyogo

Country of Mailing Address:: Japan

Postal or Zip Code of Mailing Address:: 659-0015

Correspondence Information

Correspondence Customer Number:: 001444

Representative Information

Representative Customer Number:: 001444

Domestic Priority Information

Application:: Continuity Type:: Parent Parent Filing

Application::

This Application National Stage of PCT/JP05/013950 07-29-05

Foreign Priority Information

Country:: Application Number:: Filing Date:: Priority Claimed::

Japan 2004-227227 08-03-04 Yes

Assignment Information

Assignee Name:: EDUCATION CENTER OF TRADITIONAL

CHINESE MEDICINE CO.

Street of Mailing Address:: 3-14, Nishitemma 2-chome, Kita-ku

City of Mailing Address:: Osaka-shi

State or Province of Mailing Address:: Osaka

Country of Mailing Address:: Japan

Postal or Zip Code of Mailing Address:: 530-0047

Date::